

WINE WHOLESALER SUMMARY REPORT

File this report with Virginia Alcoholic Beverage Control Authority, P.O. Box 27491, Richmond, Virginia 23261-7491, accompanied by remittance and the total of such taxes, and markup collected during the preceding month. A report is required to be filed even if you had no sales for the month. This report shall be postmarked no later than the fifteenth of the month or, if the fifteenth is not a business day, the next business day	Name (Trading As)		A.B.C. LICENSE NO: _____
	Address		REPORT FOR THE MONTH OF:
	City, State, Zip		_____ <div style="display: flex; justify-content: space-around;"> Month Year </div>

Item	Wine	Cider
1. Inventory Beginning of Month (Actual Count) Liters		
2. Quantity Received During Month (SCH A)		
3. TOTAL (Item 1 plus Item 2)	0.000	0.000
4. Breakage, Leakage, Spoilage, Etc.		
5. State Pickups		
6. Transfers Out (Schedule B)		
7. Tax Exempt Liters		
8. TOTAL (Item 4 through 7)	0.000	0.000
9. TOTAL (Item 3 less Item 8)	0.000	0.000
10. Inventory at End of Month		
11. TOTAL TAXABLE LITERS SOLD DURING MONTH (Item 9 less Item 10)	0.000	0.000

FOR CALCULATION OF WINE TAX & CIDER MARKUP

	NET LITERS	RATE	AMOUNT DUE
WINE	0.000	0.40	\$0.00
CIDER	0.000	0.08	\$0.00
TOTAL TAX OWED:			\$0.00
Total Payment Submitted With Report			

FOR ABC USE ONLY

WINE: 12% \$ _____ \$ _____ +Cider Markup \$ _____
Code 030169

WINE: 44% \$ _____
Code 01054

WINE: 44% \$ _____
Code 01057

REC.NO. _____ PMD _____ STATUS _____

I swear (or affirm) that this report has been examined by me, and, to the best of my knowledge and belief, is a true and complete report made in good faith for the period as stated, pursuant to the ALCOHOLIC BEVERAGE CONTROL ACT and regulations of Virginia A.B.C.

Signed: _____
Title: _____
Date: _____

**SCHEDULE A
WHOLESALER'S REPORT
PURCHASES**

PURCHASES (List only purchases from suppliers and purchases transfers)				
DATE GOODS RECEIVED	PURCHASE ORDER NO.	CONSIGNOR NAME OF WINERY OR WHOLESALER	LOCATION	LITERS

WHOLESALER'S SUMMARY REPORT
SCHEDULE B
 TRANSFERS OUT (To Virginia Wine Wholesalers)

DATE GOODS SHIPPED	PURCHASE ORDER NO.	NAME OF WHOLESALER	LOCATION	LITERS

INVOICE NUMBERS	INVOICE NO. FROM PREVIOUS MONTH	LIST INVOICES EXECUTED BUT NOT DELIVERED		
		WINE	CIDER	TAX EXEMPT
WINE _____ thru _____ CIDER C _____ thru _____ TAX EXEMPT TE _____ thru _____ TAX EXEMPT CIDER TEC _____ thru _____ TOTAL VA CIDER SOLD TO RETAIL LICENSEES _____ TOTAL FW WINE SOLD TO RETAIL LICENSEES _____				